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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7
	Chapter 11
	Chapter 12
	Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pá	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Robin	
	Write the name that is on	First name	First name
	your government-issued picture identification (for example, your driver's	Middle name James	Middle name
	license or passport	Last name	Last name
	Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you	Robin	
	have used in the last 8 years	First name	First name
	Include your married or	Middle name	Middle name
	maiden names.	Brooks	I set nome
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social	XXX - XX- 2375	xxx - xx-
	Security number or federal Individual	OR	OR
	Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

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D	ebtor 1 Robin First Name	James Middle Name Last Name	Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
	Identification Numbers (EIN) you have used in the last	Business name	Business name
	8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		Number Street	Number Street
		Chicago Illinois 60638	
		City State Zip Code Cook	City State Zip Code
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		City State Zip Code	City State Zip Code
6.	Why you are choosing this district	Check one:	Check one:
	to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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Debtor 1 Robin		James		Case number (if kno	own)	
First Name	Middle Name	Last Name				
Part 2: Tell the Court Abo	out Your Bankruptcy Ca	ise				
7. The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief of Bankruptcy (Form B2010) Chapter 7 Chapter 11 Chapter 12 Chapter 13					ndividuals Filing for
8. How you will pay the fee	more details about cashier's check, or may pay with a cred line of the line of the line of the official poverty you choose this options.	how you may pay. Typ money order. If your at lit card or check with a ee in installments. If y Your Filing Fee in Insta ee be waived (You ma ot required to, waive you line that applies to you	pically, if you ttorney is a pre-printer you choose allments (C ay request our fee, an ur family si	ou are paying the submitting your ed address. This option, significial Form 103 this option only id may do so on ize and you are use.	e fee yourself, payment on your and attach the BA). y if you are filingly if your incorunable to pay the pay the base of the pay the base of the base of the pay the base of	ice in your local court for you may pay with cash, our behalf, your attorney the Application for ag for Chapter 7. By law, a me is less than 150% of the fee in installments). If filing Fee Waived (Official
9. Have you filed for bankruptcy within the last 8 years?	No. Yes. District District District	ern District of Illinois	When When When	7/16/2015 MM / DD / YYYY MM / DD / YYYY	Case number Case number Case number	2015-24260
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	V No. Yes. Debtor District Debtor District		When When	MM / DD / YYYY	Relationship to Case number, i Relationship to Case number, i	if known
11. Do you rent your residence?	✓ No. Go to	ord obtained an eviction j line 12. It <i>Initial Statement About</i> ankruptcy petition.			<i>st You</i> (Form 10	1A) and file it with

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Debtor 1 Robin James Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. **|** For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Robin James Case number (if known)
First Name Middle Name Last Name

Pa	rt 5: Explain Your Effor	rts to Receive a Brie	fing About Credit Counseling			
		About Debtor 1:		Al	bout Debtor 2 (Sp	oouse Only in a Joint Case):
15.	Tell the court	You must check one:		Yo	ou must check one:	
	whether you have received briefing about credit counseling.	counseling agen	ing from an approved credit cy within the 180 days before I ptcy petition, and I received a npletion.		counseling ager	ing from an approved credit ncy within the 180 days before I ptcy petition, and I received a npletion.
	The law requires that you receive a briefing		he certificate and the payment plan, veloped with the agency.			he certificate and the payment plan, veloped with the agency.
f o o f	about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.	counseling agen	ing from an approved credit cy within the 180 days before I ptcy petition, but I do not have a npletion.		counseling ager	ring from an approved credit ncy within the 180 days before I ptcy petition, but I do not have a npletion.
			er you file this bankruptcy petition, opy of the certificate and payment			er you file this bankruptcy petition, opy of the certificate and payment
If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your		from an approve obtain those ser made my reques	ked for credit counseling services d agency, but was unable to vices during the 7 days after I t, and exigent circumstances emporary waiver of the		from an approve obtain those ser made my reques	ked for credit counseling services ed agency, but was unable to vices during the 7 days after I st, and exigent circumstances emporary waiver of the
	creditors can begin collection activities again.	requirement, attac efforts you made t unable to obtain it	ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were before you filed for bankruptcy, and imstances required you to file this		requirement, attace efforts you made unable to obtain it	ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were before you filed for bankruptcy, and umstances required you to file this
			e dismissed if the court is dissatisfied for not receiving a briefing before ruptcy.			e dismissed if the court is dissatisfied for not receiving a briefing before ruptcy.
		receive a briefing must file a certifica with a copy of the	fied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed.		receive a briefing must file a certification with a copy of the	fied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed.
			ne 30-day deadline is granted only mited to a maximum of 15 days.			he 30-day deadline is granted only mited to a maximum of 15 days.
		I am not required counseling beca	d to receive a briefing about credit use of:		I am not required counseling beca	d to receive a briefing about credit ause of:
		☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
		Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
		Active duty.	I am currently on active military duty in a military combat zone.		Active duty.	I am currently on active military duty in a military combat zone.
		about credit coun	are not required to receive a briefing seling, you must file a motion for punseling with the court.		about credit cour	are not required to receive a briefing seling, you must file a motion for ounseling with the court.

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Debtor 1 Robin First Name	Jame Middle Name Last N		(if known)
	estions for Reporting Purposes	vame	
Part 6: Answer These Que 16. What kind of debts do you have?	16a. Are your debts primarily con "incurred by an individual pri No. Go to line 16b. ✓ Yes. Go to line 17. 16b. Are your debts primarily bus	marily for a personal, family, or he siness debts? Business debts are stment or through the operation	e debts that you incurred to obtain of the business or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that fund No.		ot property is excluded and administrative secured creditors?
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	
Part 7: Sign Below	11	Teste a set a second set as t	Hard to the form of the first and the
For you	correct. If I have chosen to file under Chapt of title 11, United States Code. I ur under Chapter 7.	ter 7, I am aware that I may proce nderstand the relief available und did not pay or agree to pay some	that the information provided is true and ed, if eligible, under Chapter 7, 11,12, or 13 er each chapter, and I choose to proceed one who is not an attorney to help me fill 11 U.S.C. § 342(b)
	I request relief in accordance with t I understand making a false statem	the chapter of title 11, United Statent, concealing property, or obtate can result in fines up to \$250,009, and 3571.	ates Code, specified in this petition. sining money or property by fraud in on, or imprisonment for up to 20 years, or are of Debtor 2
	Executed on 12/22/2017 MM / DD / Y	Execu	ited on

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Debtor 1 Robin		James	Case number (if ki	no wn)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed und	der Chapter 7, 11, 12	2, or 13 of title 11, United	ave informed the debtor(s) about States Code, and have explained the so certify that I have delivered to the
If you are not	debtor(s) the notice requ	ired by 11 U.S.C. §	342(b) and, in a case in w	hich § 707(b)(4)(D) applies, certify that I
represented by an	have no knowledge after	r an inquiry that the i	nformation in the schedu	les filed with the petition is incorrect.
attorney, you do not	•	. ,		·
need to file this page.	/s/ Sean McNulty		Date	12/22/2017
	Signature of Attorney f	or Debtor	MN	// / DD / YYYY
	-			
	Sean McNulty			
	Printed name			
	Semrad Law Firm			
	Firm name			
	11101 S. Western Ave	enue		
	Street			
	Chicago		Illinois	60643
	City		State	Zip Code
	Contact phone	3128374030	Email address	smcnulty@semradlaw.com
			Illinois	
	Bar number		State	

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Fill in this information to identify your case:							
Debtor 1	Robin		James				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States E	Sankruptcy Court for the:	Northern	District of Illinois				
Case number (If known)			(State)				

Check if this is an
amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$60,333.33
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>	\$6,457.00
1c. Copy line 63, Total of all property on Schedule A/B	\$66,790.33
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$200,165.82
. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
	\$10,360.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$210,525.82
	\$210,525.82
Your total liabilities Part 3: Summarize Your Income and Expenses	\$210,525.82
Your total liabilities	\$210,525.82

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Deb	tor 1 Robin First N	ama	Middle Name	James Last Name	Cas	e number (if known)		
Part ·				ive and Statistical Re	cords			
6. A	re you filin	g for bankruptcy un	der Chapters 7, 11, or	13?				
	No. You Pes.	have nothing to repo	rt on this part of the fo	rm. Check this box and su	bmit this form to	o the court with your other	schedules.	
7. W	<u> </u>	f debt do you have?						
[mer debts are those incurre ill out lines 8-10 for statisti		ual primarily for a personal, 8 U.S.C. § 159.		
		ebts are not primaril		u have nothing to report o	n this part of the	e form. Check this box and	l submit	
			errent Monthly Income 122B Line 11; OR , Fo	e: Copy your total current irm 122C-1 Line 14.	monthly income	e from Official	\$2,125.88	
9.	Copy the	following special ca	tegories of claims fro	m Part 4, line 6 of Sched	dule E/F:			
	From Par	4 on Schedule E/F,	copy the following:			Total claim		
	9a. Domes	stic support obligation	s (Copy line 6a.)			\$0.00	_	
	9b. Taxes	and certain other deb	s you owe the governm	ment. (Copy line 6b.)		\$0.00	<u> </u>	
	9c. Claims	for death or personal	injury while you were in	ntoxicated. (Copy line 6c.)		\$0.00	<u> </u>	
	9d. Studer	nt loans. (Copy line 6f	.)			\$0.00	_	
		tions arising out of a s ms. (Copy line 6g.)	separation agreement of	r divorce that you did not r	report as	\$0.00	_	
	9f. Debts t	o pension or profit-sh	aring plans, and other	similar debts. (Copy line 6h	h.)	\$0.00	_	

\$0.00

9g. Total. Add lines 9a through 9f.

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Fill in this	information to identify your ca	ase:					
Debtor 1	Robin			James			
DODIO! 1	First Name	Middle N	ame	Last Name	-		
Debtor 2 (Spouse, if fi	ling) First Name	Middle N	ame	Last Name	-		
United Sta	ates Bankruptcy Court for the:	Northern	Dis	trict of Illinois (State)	-		
Case num (If known)	nber			(Glate)	-		
Officia	al Form 106A/B						Check if this is an amended filing
Sche	dule A/B: Prope	rty					12/1
category v responsibl write your	ategory, separately list and d where you think it fits best. E le for supplying correct infor name and case number (if k Describe Each Residenc	Be as complete an mation. If more sp nown). Answer e	nd accurate a pace is neede very question.	s possible. If two married d, attach a separate she	d people are eet to this fo	e filing together, both a orm. On the top of any a	re equally
1. Do you	u <mark>own or have any legal or eq</mark> No. Go to Part 2	juitable interest i	n any residen	ce, building, land, or sim	nilar propert	y?	
	Yes. Where is the property?						
1.1	Street address, if available, or o	other description	Single-far	property? Check all that a mily home multi-unit building	pply.	the amount of any secu	claims or exemptions. Put red claims on Schedule D: hims Secured by Property.
	4537 S. Leclaire Number Street		Condomi	nium or cooperative ured or mobile home		Current value of the entire property? \$120666.66	Current value of the portion you own? \$60333.33
	Chicago Illinois City State Cook County	60638 Zip Code	Timeshar	nt property e		Describe the nature o interest (such as fee s the entireties, or a life	simple, tenancy by
	ocum,		Other	interest in the property?	Check	Check if this is co	mmunity property
			one. Debtor 1		Cirocit	(coc mondonoms)	
			Debtor 2	•			
			Debtor 1	and Debtor 2 only			
			✓ At least o	ne of the debtors and ano	ther		
			Other inform property ide number:	nation you wish to add al ntification	bout this ite	m, such as local	
If you	own or have more than one, lis	st here:					
1.2				property? Check all that a nily home	pply.		claims or exemptions. Put red claims on <i>Schedule D:</i>
1.2	Street address, if available, or	other description	_ `	mily nome r multi-unit building		Creditors Who Have Cla	ims Secured by Property.
			ш .	nium or cooperative		Current value of the entire property?	Current value of the portion you own?
				ured or mobile home			
	Number Street		Land	nt property		Describe the nature o	
	City State	Zip Code	Timeshar Other			interest (such as fee s the entireties, or a life	
	City State	Zip Code		interest in the property?	Check	Check if this is co (see instructions)	mmunity property
			Debtor 1	•			
			Debtor 2	•			
				and Debtor 2 only ne of the debtors and and	ther		
			ш			an analoga to set	
				nation you wish to add al ntification number <u>:</u>	oout this ite	m, such as local	

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btor 1				nber (if known)	
	First Name	Middle Name	Last Name		
Stre	et address, if available, or o		What is the property? Check all that apply. Single-family home	the amount of any sec	l claims or exemptions. Pour eured claims on <i>Schedule</i> Saims Secured by Property
			Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
	nber Street	7'. 0. 4	Land Investment property Timeshare	Describe the nature of interest (such as fee the entireties, or a lit	simple, tenancy by
2:	the dollar value of the pove attached for Part 1. W	rite that number l	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number: all of your entries from Part 1, including any enthere. st in any vehicles, whether they are registered on also report it on Schedule G: Executory Contracts a	Check if this is c (see instructions) m, such as local ries for pages not? Include any vehicles	ommunity property
rs, va No Yes		itility vehicles, moto	orcycles		
3.1	Model: Year:		Who has an interest in the property? Check one. Debtor 1 only	the amount of any sec	d claims or exemptions. cured claims on <i>Schedul</i> claims Secured by Proper
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
			At least one of the debtors and another Check if this is community property (see instructions)		
3.2	Make Model: Year:		Who has an interest in the property? Check one. Debtor 1 only	the amount of any sec	d claims or exemptions. cured claims on <i>Schedul</i> claims Secured by Proper
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?

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	Robin First Name	Middle Name	James Last Name	Case numbe		
3.3	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and instructions)	nd another	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?	red claims on <i>Schedule</i>
3.4	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	operty? Check	Do not deduct secured the amount of any secu Creditors Who Have Clate Current value of the entire property?	red claims on <i>Schedule</i>
			At least one of the debtors at Check if this is community instructions)			
	nples: Boats, trailers, motors	•	er recreational vehicles, other ve , fishing vessels, snowmobiles, mo	•		
Exa	nples: Boats, trailers, motors No Yes	•		torcycle accessori perty? Check nd another		red claims on <i>Schedule</i>

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De	ebtor 1	Robin First Name	Middle Name	James Last Name	Case number (if known)	
Pa	rt 3:		our Personal and Household Ite			
D	o you	own or hav	e any legal or equitable interest	t in any of the following	g items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	Examp	_	and furnishings liances, furniture, linens, china, kitchenv	ware		
<u> </u>	No Yes. [Describe	Living Room Set			\$25.00
		tronics oles: Television	s and radios; audio, video, stereo, and o	digital equipment; compute	ers, printers, scanners; music	1
<u> </u>	Yes. [Describe	Televisions (3), Tablet			\$250.00
	Examp	•	ue and figurines; paintings, prints, or other in, or baseball card collections; other co		• •	
	No Yes. [Describe				
		les: Sports, ph	rts and hobbies otographic, exercise, and other hobby ones, carpentry tools; musical instruments		tables, golf clubs, skis; canoes	I
✓	No Yes. [Describe				
	0. Fire Examp		es, shotguns, ammunition, and related	equipment		
✓	No					
	Yes. [Describe				
			clothes, furs, leather coats, designer wea	ear, shoes, accessories		
	No Voc 1	Describe	Used Clothing			1 .
⊻	163. 1	Jeschbe	osed Clothing			\$100.00
		-	ewelry, costume jewelry, engagement ri er	ings, wedding rings, heirlod	om jewelry, watches, gems,	
<u>✓</u>	No Yes. [Describe	Misc. Jewelry			\$10.00
		n-farm animal oles: Dogs, cat	s s, birds, horses			
✓	No Yes. [Describe				
1	4. Any	other persor	al and household items you did not	already list, including an	y health aids you did not list	
✓	No					
	Yes. [Describe				
			llue of all of your entries from Part 3, t number here	, including any entries fo	r pages you have attached	\$835.00

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Debt	tor 1 Robin		James	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 4	Describe Your F	Financial Assets			
Do	you own or have an	y legal or equitable interest	in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.					
E	✓ No	ve in your wallet, in your home, in	·		
	_			Cash:	
17.	and other similar in	avings, or other financial accounts stitutions. If you have multiple acc		s in credit unions, brokerage houses, on, list each.	
	☐ No ✓ Yes		Institution name:		
		17.1. Checking account:	Chase		\$50.00
		17.2. Checking account:	Chase		\$0.00
		17.3. Savings account:			
		17.4. Savings account:			
		17.5. Certificates of deposit:			
		17.6. Other financial account:			
		17.7. Other financial account:			
		17.8. Other financial account:			
		17.9. Other financial account:			
18.	Examples: Bond funds,	or publicly traded stocks , investment accounts with broker	rage firms, money market acco	ounts	
	✓ No Yes	Institution or issuer name:			
19.	an LLC, partnership, a		ted and unincorporated bus	sinesses, including an interest in	
	✓ No Yes. Give specific information about them	Name of entity		% of ownership:	
	шош				

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Deb	tor 1 Robin		James	Case number (if known)	
	First Name	Middle Name	Last Name		
20.	Negotiable instruments	orate bonds and other negotial include personal checks, cashiers ents are those you cannot transfe	' checks, promissory n	otes, and money orders.	
		ents are those you cannot transfe	i to someone by signi	ig of delivering them.	
	✓ No				
	Yes. Give specific information about	laguer namer			
	them	Issuer name:			
		-			<u> </u>
21.	Retirement or pension	accounts			
	Examples: Interests in IF	RA, ERISA, Keogh, 401(k), 403(b)), thrift savings accoun	ts, or other pension or profit-sharing plans	
	✓ No	Town of accounts	la stitution and a		
	Yes. List each	Type of account:	Institution name:		
	account separately.	401(k) or similar plan:			_
		Pension plan:			
		IRA:			
		Retirement account:			
		Keogh:			
		Additional account:			-
		Additional account:			
22.	Security deposits and	prepayments			-
	Your share of all unused Examples: Agreements v	d deposits you have made so that with landlords, prepaid rent, publi			
	companies, or others				
	✓ No		Institution name:		
	Yes	Electric:			_
		Gas:			_
		Heating oil:			_
		Security deposit on rental unit:			_
		Prepaid rent:			
		Telephone:			
		Water:			_
		Rented furniture:			
		Other:			
23.	Annuities (A contract fo	or a periodic payment of money to	you, either for life or f	or a number of years)	
	✓ No				
	Yes	Issuer name and description:			
					-
		-			

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Debt	tor 1 Robin		umber (if known)	
0.4	First Name Middle			
24.	26 U.S.C. §§ 530(b)(1), 529A(b), and 529	count in a qualified ABLE program, or under a qualifient (b)(1).	ed state tuition program.	•
	✓ No Institution name and descr	iption. Separately file the records of any interests.11 U.S.C	c. § 521(c):	
25.	Trusts, equitable or future interests in exercisable for your benefit	property (other than anything listed in line 1), and rig	hts or powers	
	✓ No ☐ Yes. Describe			
26.	Examples: Internet domain names, websit	e secrets, and other intellectual property tes, proceeds from royalties and licensing agreements		
	Yes. Describe			
27.	Licenses, franchises, and other genera	-		1
	Examples: Building permits, exclusive licer No	nses, cooperative association holdings, liquor licenses, pro	ofessional licenses	
	Yes. Describe			
Mor	ney or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
				•
28.	Tax refunds owed to you			
28.				
28.	No Ves. Give specific information	Anticipated 2017 Income Tax Refund (EIC)	Federal:	\$5572.00
28.	No	Anticipated 2017 Income Tax Refund (EIC)	Federal: State:	\$0.00
	Yes. Give specific information about them, including whether you already filed the returns and the tax years		State: Local:	\$0.00 \$0.00
	Yes. Give specific information about them, including whether you already filed the returns and the tax years	Anticipated 2017 Income Tax Refund (EIC) spousal support, child support, maintenance, divorce set	State: Local:	\$0.00 \$0.00
	Yes. Give specific information about them, including whether you already filed the returns and the tax years		State: Local:	\$0.00 \$0.00
	Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony,		State: Local: tlement, property settlemer	\$0.00 \$0.00
	Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony,		State: Local: tlement, property settlemer Alimony: Maintenance: Support:	\$0.00 \$0.00 at \$0.00 \$0.00 \$0.00
	Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony,		State: Local: tlement, property settlemer Alimony: Maintenance: Support: Divorce settlement:	\$0.00 \$0.00 at \$0.00 \$0.00 \$0.00 \$0.00
29.	Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, Yes. Give specific information		State: Local: tlement, property settlemer Alimony: Maintenance: Support:	\$0.00 \$0.00 at \$0.00 \$0.00
29.	Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, Yes. Give specific information Other amounts someone owes you Examples: Unpaid wages, disability insurant		State: Local: tlement, property settlemer Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 at \$0.00 \$0.00 \$0.00 \$0.00
29.	Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, Yes. Give specific information Other amounts someone owes you Examples: Unpaid wages, disability insurant	spousal support, child support, maintenance, divorce set	State: Local: tlement, property settlemer Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 at \$0.00 \$0.00 \$0.00 \$0.00

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Deb ¹	tor 1 Robin		James	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance polici Examples: Health, disability, or		rings account (HSA); credit, I	nomeowner's, or renter's insurance	
	No Yes. Name the insurance of each policy and list its v	company	oany name:	Beneficiary:	Surrender or refund value
32.	Any interest in property that If you are the beneficiary of a liproperty because someone have No	iving trust, expect procee		ey, or are currently entitled to receive	
33.	Claims against third parties Examples: Accidents, employn No Yes. Describe			a demand for payment	
34.	Other contingent and unlique to set off claims No Yes. Describe	uidated claims of every	nature, including counter	claims of the debtor and rights	
35.	Any financial assets you did No Yes. Describe	 not already list			
36.	Add the dollar value of all of for Part 4. Write that number	•			\$5622.00
Part				nterest In. List any real estate in Par	t 1.
37.	Do you own or have any legative No. Go to Part 6. Yes. Go to line 38.	al or equitable interest	in any business-related pi		Current value of the portion you own? Do not deduct secured claims or exemptions
38.	Accounts receivable or com No Yes. Describe	missions you already e	arned		
39.	Office equipment, furnishing Examples: Business-related co No Yes. Describe		ems, printers, copiers, fax m	achines, rugs, telephones, desks, chairs, elec	tronic devices

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Deb	tor 1 Robin	James Case number (if known)	
	First Name	Middle Name Last Name	
40.	Machinery, fixtures, eq	uipment, supplies you use in business, and tools of your trade	
	✓ No		
	Yes. Describe]
	-		
41.	Inventory		
	✓ No		
	Yes. Describe		1
			4
42.	Interests in partnership	ps or joint ventures	
	✓ No		
		Name of entity: % of ownership:	
	Yes. Give specific information about		
	them		
			_
43	Customer lists, mailing l	lists, or other compilations	_
	_		
	✓ No		
	Yes. Do your lists inc	clude personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	☐ No		
	Yes. Describ	he	
	L Tes. Describ		
44.	Any business-related p	roperty you did not already list	
	—		
	No		<u> </u>
	Yes. Give specific information		
	iiiioiiiiatioii		
45. A	dd the dollar value of all	l of your entries from Part 5, including any entries for pages you have attached	
		here	
<u> </u>	D		
Pari		rm- and Commercial Fishing-Related Property You Own or Have an Interest In. nterest in farmland, list it in Part 1.	
46.	Do you own or have an	y legal or equitable interest in any farm- or commercial fishing-related property?	
	No. Go to Part 7.		Current value of the
	Yes. Go to line 47.		portion you own? Do not deduct secured claims
	_		or exemptions
47.	Farm animals		
	Examples: Livestock, por	ultry, farm-raised fish	
	√ No		
	Yes. Describe		1
			-

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Debt	tor 1 Robin		James	Case number (if known)	
	First Name	Middle Name	Last Name		
48.	Crops-either growing or	harvested			
	✓ No				
	Yes. Describe				
49.	Farm and fishing equipm	ent, implements, machinery, fixtu	ires, and tools of trade		
	✓ No				
	Yes. Describe				
					
50.	Farm and fishing supplie	s, chemicals, and feed			
	✓ No				
	Yes. Describe				
51	Any farm- and commerci	—— al fishing-related property you did	d not already list		
51.	—	ar institute related property you did	a not an eady list		
	✓ No				
	Yes. Describe				
					_
		f your entries from Part 6, includi ere		-	
▶	art o. write that humber in				
Part	Describe All Prope	erty You Own or Have an Inter	rest in That You Did N	Not List Above	
		ty of any kind you did not already			
	Examples: Season tickets,				
	✓ No				1
	Yes. Give specific				
	information				
54. A	dd the dollar value of all o	f your entries from Part 7. Write t	hat number here		>
		•			
Part	8: List the Totals of E	ach Part of this Form			
I	Dowt 1. Tatal was lastate 1	ne 2		•	\$60333.33
55. F	art 1. Total real estate, ii	ne 2			
56. r	part 2 total vehicles, line 5	i		_	
1	art 3: Total personal and		****	-	
			\$835.00	-	
58.P	art 4: Total financial asse	ts, line 36	\$5622.00	_	
59. i	Part 5: Total business-rela	ted property, line 45			
60. I	Part 6: Total farm- and fish	ning-related property, line 52	-	-	
	Part 7: Total other propert		-	-	
62.	Total personal property. A	dd lines 56 through 61	\$6457.00		+ \$6457.00
				Copy personal property total	
					\$66790.33
63. T	otal of all property on Sch	edule A/B. Add line 55 + line 62			

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Debtor 1	Robin		James	Case number (if known)	
	First Names	Middle Nones	Look Marso		·

Schedule A/B: Property. Additional page

Part 3: Describe	Your Personal and Household Items	
Do you own or ha	ve any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.2. Household goo	ds and furnishings	
No		
Yes. Describe	Kitchen Table and Chairs	\$250.00
6.3. Household goo	ds and furnishings	
No		
Yes. Describe	Bedroom Set	\$100.00
6.4. Household goo	ds and furnishings	
No		
Yes. Describe	Misc. Household Goods	\$100.00

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Debtor 1	Robin		James	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)	
Case number (If known)			(State)	

Schedule C: The Property You Claim as Exempt

04/16

Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pai	t 1: Identify the Property You Claim	n as Exempt		
1.	Which set of exemptions are you claim ✓ You are claiming state and federal — You are claiming federal exemption	nonbankruptcy exemp	otions. 11 U.S.C. § 522(b)(3)	
2.	For any property you list on Schedule A	/B that you claim as e	xempt, fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
	Brief description: Federal, Anticipated 2017 Income Tax Refund (EIC) Line from	\$5,572.00	\$5,572.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(g)(1)
	Brief description: 4537 S. Leclaire, Chicago, IL 60638 Line from Schedule A/B: 01	\$60,333.33	\$0 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-901
3.	✓ No	ery 3 years after that for o	375? cases filed on or after the date of adjustment.) rithin 1,215 days before you filed this case?	

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Debtor 1 Robin James Case number (if known) Last Name

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
	Copy the value from Schedule A/B		
Brief description:	\$50.00	\$50.00	735 ILCS 5/12-1001(b)
Checking account, Chase Line from		100% of fair market value, up to any applicable statutory limit	_
Schedule A/B: 17		,	
Brief description:	\$25.00	\$25.00	735 ILCS 5/12-1001(b)
Living Room Set Line from Schedule A/B: 06		100% of fair market value, up to any applicable statutory limit	_
Brief description:	\$250.00		735 ILCS 5/12-1001(b)
Kitchen Table and	<u> </u>	\$250.00	_
Chairs Line from Schedule A/B: 06		100% of fair market value, up to any applicable statutory limit	
Brief	\$100.00	_	735 ILCS 5/12-1001(b)
description: Bedroom Set	\$100.00	\$100.00	_
Line from Schedule A/B: 06		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$100.00	\$100.00	735 ILCS 5/12-1001(a)
Used Clothing Line from Schedule A/B: 11		100% of fair market value, up to any applicable statutory limit	_
Brief description:	\$250.00		735 ILCS 5/12-1001(b)
Televisions (3), Tablet	Ψ230.00	\$250.00	_
Line from Schedule A/B: 07		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$10.00	\$10.00	735 ILCS 5/12-1001(b)
Misc. Jewelry		\$10.00	_
Line from Schedule A/B: 12		applicable statutory limit	
Brief description:	\$100.00	1	735 ILCS 5/12-1001(b)
Misc. Household Goods		\$100.00	_
Line from Schedule A/B: 06		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$0.00		735 ILCS 5/12-1001(b)
Checking account,	Ψ0.00	\$0	_
Chase Line from		100% of fair market value, up to any applicable statutory limit	
Schedule A/B: 17			

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		DO	cument Page 23 01	09		
Fill in this info	rmation to identify your ca	ise:				
Debtor 1	Robin First Name	Middle Name	James Last Name			
Debtor 2	riistinaille	Middle Name	Last Name			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States I	Bankruptcy Court for the:	Northern	District of Illinois			
Case number (If known)			(State)			
Official	Form 106D			_1		Check if this is a amended filing
Schedu	ule D: Credite	ors Who Ha	ve Claims Secur	ed by Prop	ertv	12/1
1. Do any No. Yes.	e number (if known). creditors have claims s	ecured by your proper	nber the entries, and attach it to	·		jes, write your
2. List all separate	secured claims. If a creditely for each claim. If more the	han one creditor has a par	cured claim, list the creditor ticular claim, list the other creditors order according to the creditor's	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Creditor' P.O. B Numb NORTH City Who ov Del Del Del At I and	ox 1093 Deer Street IRIDGE CA 91328 State ZIP Code Eves the debt? Check one. Dotor 1 only Dotor 2 only Dotor 1 and Debtor 2 only deast one of the debtors d another eck if this claim relates a community debt	4537 S. Leclaire, Chicae As of the date you file Contingent Unliquidated Disputed Nature of lien. Check a An agreement you car loan)	made (such as mortgage or secured as tax lien, mechanic's lien)	\$200,165.82	\$120,666.66	<u>\$79,499.1</u> 6
Date de incurre	ebt was	Last 4 digits of accou	nt number			

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$200,165.82

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Filli	n this infor	mation to identify your c	ase:					
Deb	otor 1	Robin		James				
Dala	 0	First Name	Middle Name	Last Name				
	otor 2 use, if filing)	First Name	Middle Name	Last Name				
Unit	ted States E	Bankruptcy Court for the:	Northern	District of Illinois (State)				
Cas (If kn	e number _{own)}							
Off	ficial F	orm 106E/F				Ch	eck if this is ar	n amended filing
Sc	chedu	ule E/F: Cre	editors Who	Have Unse	cured Claims			12/15
othe Form clain the e knov	r party to a n 106A/B) a ns that are entries in t vn).	any executory contracts and on Schedule G: Exe e listed in Schedule D: C he boxes on the left. At	s or unexpired leases that ecutory Contracts and Une Creditors Who Hold Claims	could result in a claim. expired Leases (Official I Secured by Property. If	is and Part 2 for creditors wi Also list executory contracts Form 106G). Do not include a more space is needed, copy top of any additional pages, v	s on <i>Sched</i> iny credito the Part y	<i>lule A/B: Prop</i> ors with partia ou need, fill i	perty (Official ally secured it out, number
1.	Do any c	reditors have priority ur	nsecured claims against ye	ou?				
	✓ No. (Go to Part 2.						
	Yes.							
2.	listed, idea As much Continuat	ntify what type of claim it as possible, list the claims tion Page of Part 1. If mor	is. If a claim has both priorit s in alphabetical order accord e than one creditor holds a p	y and nonpriority amounts ding to the creditor's name particular claim, list the oth		both priorit	ty and nonpric	ority amounts.
	(For an ex	cplanation of each type of	claim, see the instructions f	or this form in the instruct	ion booklet.)	Total	Driority	Nonpriority

claim

amount

amount

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Debte	or 1	Robin	James	Case number (if known)	
		First Name Middle Name	Last Name		
Part :	2:	List All of Your NONPRIORITY Unsecured Clai	ims		
[any creditors have nonpriority unsecured claims agair No. You have nothing to report in this part. Submit this Yes.	-	e court with your other schedules.	
l I	unse f me	ecured claim, list the creditor separately for each claim. For	each claim I	er of the creditor who holds each claim. If a creditor has more listed, identify what type of claim it is. Do not list claims already in Part 3.If you have more than four priority unsecured claims fill ou	cluded in Part 1.
					Total claim
4.1		alvary SPV I, LLC onpriority Creditor's Name		Last 4 digits of account number	\$1,500.00
		00 Summit Lake Drive		When was the debt incurred?n/a	
		umber Street uite 400		As of the date you file, the claim is: Check all that apply. Contingent	
	.,	W W A 40505		Unliquidated	
	<u>Va</u> Ci	alhalla New York 10595 ty State Zip Code		Disputed	
	w	ho incurred the debt? Check one.		Type of NONPRIORITY unsecured claim:	
	✓	Debtor 1 only		Student loans	
	F	Debtor 2 only Debtor 1 and Debtor 2 only		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	F	At least one of the debtors and another		Debts to pension or profit-sharing plans, and other similar	
	F	Check if this claim relates to a community debt		debts	
	L Is	the claim subject to offset?		Other. Specify Other	
	<u>-</u>	No Yes			
4.2	CA	AP ONE		Lost 4 digits of cooperat purpose 6500	\$192.00
	26	onpriority Creditor's Name 5525 N RIVERWOODS BLVD		Last 4 digits of account number 6593 When was the debt incurred? 5/2011	
	Νι	umber Street		As of the date you file, the claim is: Check all that apply.	
	_			Contingent	
	M Ci	ETTAWA Illinois 60045 ty State Zip Code		Unliquidated	
		ho incurred the debt? Check one.		Disputed	
	~	Debtor 1 only		Type of NONPRIORITY unsecured claim:	
		Debtor 2 only		Student loans	
		Debtor 1 and Debtor 2 only		Obligations arising out of a separation agreement or	
		At least one of the debtors and another		divorce that you did not report as priority claims	
	F	Check if this claim relates to a community debt		Debts to pension or profit-sharing plans, and other similar debts	
	ls	the claim subject to offset?		Other. Specify CreditCard	
	~	No		_	
		Yes			
4.3	CA	AP ONE		Last 4 digits of account number 5765	\$0.00
		onpriority Creditor's Name 6525 N RIVERWOODS BLVD		When was the debt incurred? 9/2010	
	_	umber Street		As of the date you file, the claim is: Check all that apply.	
				Contingent	
	M Ci	ETTAWA Illinois 60045 ty State Zip Code		Unliquidated	
		ho incurred the debt? Check one.		Disputed	
	√	Debtor 1 only		Type of NONPRIORITY unsecured claim:	
		Debtor 2 only		Student loans	
		Debtor 1 and Debtor 2 only		Obligations arising out of a separation agreement or	
	Ē	At least one of the debtors and another		divorce that you did not report as priority claims	
	F	Check if this claim relates to a community debt		Debts to pension or profit-sharing plans, and other similar debts	
	ls	the claim subject to offset?		Other. Specify CreditCard	
	V	No		_	
	F	Yes			

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Debtor 1 Robin James Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 DEVILLE ASSET MANAGEME \$201.00 Last 4 digits of account number 97N1 Nonpriority Creditor's Name When was the debt incurred? 5/2015 1132 Glade Road Number As of the date you file, the claim is: Check all that apply. Contingent Colleyville Texas 76034 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **V** ORIGINAL CREDITOR: **✓** No Other. Specify **FINGERHUT** Yes **FST PREMIER** \$0.00 Last 4 digits of account number 5800 Nonpriority Creditor's Name 900 W DÉLAWARE When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent SIOUX FALLS South Dakota 57104 Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ CreditCard Is the claim subject to offset? **✓** No Yes HSN 4.6 \$1,700.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 659707 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated San Antonio 78265 Texas City Zip Code State Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims

✓ No ☐ Yes

At least one of the debtors and another

Is the claim subject to offset?

Check if this claim relates to a community debt

debts

Other. Specify

Debts to pension or profit-sharing plans, and other similar

Other

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Debtor 1 Robin James Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 KOHLS/CAPONE \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 11/2012 PO BOX 3115 Number Street As of the date you file, the claim is: Check all that apply. Contingent 53201 MILWAUKEE Wisconsin Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ CreditCard Is the claim subject to offset? **✓** No Yes 4.8 MDNGHT VLVT \$0.00 Last 4 digits of account number 4865 Nonpriority Creditor's Name P.O. Box 800849 When was the debt incurred? 11/2012 Number Street As of the date you file, the claim is: Check all that apply. c/o M.E. Bennett Contingent Texas 75380 Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ CreditCard Is the claim subject to offset? **✓** No PLS Financial 4.9 \$1,440.00 Last 4 digits of account number Nonpriority Creditor's Name One South Wacker Dr 36th Floor When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60606 Chicago City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims

✓ No Yes

At least one of the debtors and another

Is the claim subject to offset?

Check if this claim relates to a community debt

debts

Other. Specify _

Debts to pension or profit-sharing plans, and other similar

Other

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Debtor 1 Robin James Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 \$1,654.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 6/2015 120 Corporate Boulevard Number Street As of the date you file, the claim is: Check all that apply. Contingent Norfolk Virginia 23502 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **|** ORIGINAL CREDITOR: 08 **✓** No WORLD FINANCIAL CAPITAL **BANK** Other. Specify Yes 4.11 PORTFOLIO RC \$1,258.00 Last 4 digits of account number 5694 Nonpriority Creditor's Name 120 Corporate Boulevard When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Norfolk Virginia 23502 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **✓ ORIGINAL CREDITOR: 08 ✓** No Other. Specify WEBBANK Yes PRFRD CUS AC 4.12 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name CSCL DISPUTE TEAM PO BOX 14517 When was the debt incurred? 9/2011 Number Street As of the date you file, the claim is: Check all that apply. Contingent **DES MOINES** 50306 Iowa Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ CreditCard Is the claim subject to offset? No

Yes

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Debtor 1 Robin James Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 Speedy Cash \$232.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1931 N. Mannheim Rd Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60160 Melrose Park Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify __ Other Is the claim subject to offset? **✓** No Yes 4.14 SYNCB/JCP \$0.00 4586 Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? 4/1980 PO BOX 965007 Number As of the date you file, the claim is: Check all that apply. Contingent 32896 Orlando Florida Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No Yes SYNCB/QVC 4.15 \$0.00 Last 4 digits of account number 3154 Nonpriority Creditor's Name PO BOX 965005 When was the debt incurred? 12/2010 Number As of the date you file, the claim is: Check all that apply. Contingent ORLANDO 32896 Florida Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify ____ CreditCard Is the claim subject to offset? **✓** No

Yes

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Debtor 1		dle Name	James Last Name	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecur	ed Claims - Contir	nuation Pag	ge	
-	After listing any entries on this pag	e, number them begi	nning with 4.	.5, followed by 4.6, and so forth.	n
N 1	JSCB CORP Nonpriority Creditor's Name 101 HARRISON STREE Number Street		WI	s of the date you file, the claim is: Check all that apply. \$2,183. \$2,183.	00
[[[[ARCHBALD Pennsylval City State Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ar Check if this claim relates to a s the claim subject to offset? No Yes	Zip Code	[Contingent Unliquidated Disputed pe of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Collection; Collecting for ORIGINAL CREDITOR: 01 Other. Specify ASHWORTH COLLEGE	

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Debtor 1 Robin James Case number (if known)

First Nar	ne Middle Name Last Name						
Part 4: Add th	e Amounts for Each Type of Unsecured Claim						
	mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	for s	tatistical reporting purpo	ses only.	. 28 U.S.C. §1	59.	
			Total claims				
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00				
	6b. Taxes and certain other debts you owe the government	6b.	\$0.00				
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00				
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00				
	6e. Total. Add lines 6a through 6d.	6e.	\$0.00				
			Total claims				
Total claims from Part 2	6f. Student loans	6f.	\$0.00				
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00				
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00				
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$10,360.00				
	Gi Total Add lines Of through Gi	e:	\$10,360.00				

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Fill in this infor	mation to identify your c	ase:		
Debtor 1	Robin		James	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)	_
Case number (If known)			(2-11-17)	_

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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		0430 17 073	Do	ocument Page	33 of 69
Fill in	this infor	mation to identify your (case:		
Debto	or 1	Robin		James	
Dobto	· · · 0	First Name	Middle Name	Last Name	
Debto (Spous	e, if filing)	First Name	Middle Name	Last Name	
United	d States E	sankruptcy Court for the:	Northern	District of Illinois	
	number			(State)	
Off		Form 106H			Check if this is an amended filing
Sch	edul	e H: Your Co	debtors		12/15
	Do you lead of the property of	r every question. have any codebtors? (I ss he last 8 years, have y a, Idaho, Louisiana, Neva b. Go to line 3. ss. Did your spouse, for	bu lived in a community pada, New Mexico, Puerto Ri	do not list either spouse as a property state or territory? co, Texas, Washington, and valent live with you at the fi	? (Community property states and territories include Arizona, I Wisconsin.)
		Name of your spouse, Number Street	former spouse, or legal equ	ivalent	<u> </u>
		City	State	Zip Code)
3.	again a	s a codebtor only if tha	t person is a guarantor o	r cosigner. Make sure you	if your spouse is filing with you. List the person shown in line 2 have listed the creditor on <i>Schedule D</i> (Official Form 106D), ledule D, Schedule E/F, or Schedule G to fill out Column 2.
	Column	1: Your codebtor			Column 2: The creditor to whom you owe the debt
					Check all schedules that apply:

3.1 James, Michael **✓** Schedule D, line 2.1 Name Schedule E/F, line_____ 10902 S. State Number Street Schedule G, line Chicago City 60628 Illinois Zip Code State

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		Do	Cument	i age 3	+ 01 03		
Fill in this in	nformation to identify	your case:					
Debtor 1	Robin		James	S			
	First Name	Middle Name	Last N	lame	Che	eck if this is:	
Debtor 2 (Spouse, if filing	g) First Name	Middle Name	Last N	lama	— I п	An amended filing	
					ΙÄ	A supplement showi	ng post-petition chapter 13
the:	s Bankruptcy Court for	Northern	District of III	State)	- "	expenses as of the fo	
Case numbe	er		•		_	MM / DD / YYYY	
, ,						IVIIVI / DD / TTTT	
<u>Official</u>	Form 106I						
Schedu	ıle I: Your In	come					12/1
responsible information spouse. If m number (if k	for supplying correct about your spouse.		e married ar d your spou	nd not filing j se is not filin	ointly, and you g with you, do	ur spouse is living not include inforn	with you, include nation about your
1. Fill in yo	our employment		Debtor 1	l		Debtor 2	
		Employment status	Employment status Employ			Employed	
	ive more than one job, separate page with		Not E	mployed		✓ Not Employed	
informati employe	on about additional rs.	Occupation	_				
	part time, seasonal, or	Employer's name	Mothorio	Touch Inc. II			
	loyed work.						
	ion may include student maker, if it applies.	Employer's address	2501 W. 7 Number St			Number Street	
			Chicago	Illinois	60636		
			City	State	Zip Code	City	State Zip Code
		How long employed there?	-				<u></u>
Part 2: G	ive Details About M	Monthly Income					
	nonthly income as of ess you are separated.	the date you file this forn	n. If you have	nothing to rep	port for any line,	write \$0 in the space.	Include your non-filing
		e more than one employer,	combine the	information fo	r all employers fo	or that person on the	lines below. If you need
more space	e, attach a separate she	ei io this form.		For	Debtor 1	For Debtor 2 or non-filing spouse	
2. List m	onthly gross wages, sal	ary, and commissions (befo	re all payroll	2.	\$1,968.42		0.00
		, calculate what the monthly		-	ψ1,000.π2		
3. Estima	ate and list monthly ove	rtime pay.		3.	+ \$0.00	+ \$	60.00

\$1,968.42

\$0.00

4. Calculate gross income. Add line 2 + line 3.

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Debto		ames	Case numbe	r (if	
	First Name Middle Name La	ast Name	For Debtor 1	For Debtor 2 or non-filing spouse	
Cop	y line 4 here	→ 4.	\$1,968.42	\$0.00	
5. List	all payroll deductions:				
5a.	Tax, Medicare, and Social Security deductions	5a.	\$330.11	\$0.00	
5b.	Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00	
5c.	Voluntary contributions for retirement plans	5c.	\$0.00	\$0.00	
5d.	Required repayments of retirement fund loans	5d.	\$0.00	\$0.00	
5e.	Insurance	5e.	\$0.00	\$0.00	
5f. I	Domestic support obligations	5f.	\$0.00	\$0.00	
5g.	Union dues	5g	\$0.00	\$0.00	
5h.	Other deductions. Specify:	5h. +	\$0.00 +	\$0.00	
6. Add +5h.	the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f$	+ 5g 6.	\$330.11	\$0.00	
7. Calc	culate total monthly take-home pay. Subtract line 6 from line	4. 7.	\$1,638.30	\$0.00	
8. List	all other income regularly received:				
	Net income from rental property and from operating a business, profession, or farm				
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00	\$0.00	
	Interest and dividends	8b.	\$0.00	\$0.00	
	Family support payments that you, a non-filing spouse, or a dependent regularly receive	- -			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c	\$0.00	\$0.00	
8d.	Unemployment compensation	8d	\$0.00	\$0.00	
8e.	Social Security	8e.	\$0.00	\$450.00	
 	Other government assistance that you regularly receive include cash assistance and the value (if known) of any noncash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or nousing subsidies Specify: Food Assistance Programs Income	8f	\$178.0 <u>0</u>	<u>\$0.00</u>	
8g.	Pension or retirement income	8g.	\$0.00	\$0.00	
8h.	Other monthly income. Specify:	8h. +	\$0.00 +	\$0.00	
9. Add	all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g +	8h. 9.	\$178.00	\$450.00	
	culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spo	ouse 10.	\$1,816.30	\$450.00 =	\$2,266.30
Incl frien	Ite all other regular contributions to the expenses that you ude contributions from an unmarried partner, members of your hads or relatives. In the include any amounts already included in lines 2-10 or amounts.	nousehold, your d	ependents, your roomr		
Spe	cify:			11. +	\$0.00
	d the amount in the last column of line 10 to the amount in e that amount on the Summary of Schedules and Statistical Sum			,	\$2,266.30
					Combined monthly income
13. Do	you expect an increase or decrease within the year after you	ou file this form?			
	Yes. Explain:				

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		Docu	ment Page 36 of 69)	
Fill in this infor	mation to identify	your case:			
Debtor 1	Robin		James		
Dobtor 2	First Name	Middle Name	Last Name	Check if this is:	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	An amended filir	ıg
United States E	Bankruptcy Court fo	or the: Northern [District of Illinois (State)		howing post-petition chapter 13 the following date:
Case number (If known)				MM / DD / YYYY	/
Official	Form 106	<u>5J</u>			
Schedul	e J: Your E	Expenses			12/15
information. If (if known). Ans	more space is nee wer every question				
	cribe Your Hou	sehold			
1. Is this a joi	nt case?				
✓ No. Go	o to line 2				
Yes. D	oes Debtor 2 live	in a separate household?			
	No				
	Yes. Debtor 2 m	nust file Official Forms 106J-2, Expen	ses for Separate Household of Debi	or 2.	
2. Do you hav	e dependents?	No			
Do not list Debtor 2.	Debtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
			Child	20 years	No. ✓ Yes.
			Child	16 years	Yes. No.
					Yes.
expenses o	penses include f people other	✓ No			
than yourself an dependents	•	Yes			
Part 2: Esti	mate Your Ong	oing Monthly Expenses			
Estimate you	r expenses as of yor of a date after the	our bankruptcy filing date unless y bankruptcy is filed. If this is a sup	•	•	•
	•	non-cash government assistance in ded it on Schedule I: Your Income	•		Your expenses
	I or home ownerslor the ground or lot	hip expenses for your residence. In . 4.	clude first mortgage payments and		\$729.00
If not inc	luded in line 4:				
4a. Real e	state taxes				4a \$0.00

4b.

4c.

4d.

\$0.00

\$0.00

\$0.00

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Robin James Case number (if known) Last Name

First Name	Middle Name Last Name		
			Your expenses
5. Additional mortgage payments for	or your residence, such as home equity loans	5.	\$0.00
6. Utilities:			
6a. Electricity, heat, natural gas		6a.	\$290.00
6b. Water, sewer, garbage collection	n	6b.	\$80.00
6c. Telephone, cell phone, Interne	s, satellite, and cable services	6c.	\$200.00
6d. Other. Specify:		6d	\$0.00
7. Food and housekeeping supplies		7.	\$267.00
8. Childcare and children's educati	on costs	8.	\$0.00
9. Clothing, laundry, and dry cleani	ng	9.	\$20.00
10. Personal care products and ser	vices	10.	\$30.00
11. Medical and dental expenses		11.	\$0.00
12. Transportation. Include gas, main Do not include car payments	ntenance, bus or train fare.	12.	\$80.00
13. Entertainment, clubs, recreation	n, newspapers, magazines, and books	13.	\$0.00
14. Charitable contributions and re	ligious donations	14.	\$0.00
15. Insurance. Do not include insurance deducted	I from your pay or included in lines 4 or 20.		
15a. Life insurance		15a	\$0.00
15b. Health insurance		15b	\$180.00
15c. Vehicle insurance		15c	\$120.00
15d. Other insurance. Specify:		15d	\$0.00
16. Taxes. Do not include taxes dedu	cted from your pay or included in lines 4 or 20.		
Specify:		16	\$0.00
17. Installment or lease payments:		10	
17a. Car payments for Vehicle 1		17a	\$265.00
17b. Car payments for Vehicle 2		17b	\$0.00
17c. Other. Specify:		17c	\$0.00
		17d	\$0.00
	ntenance, and support that you did not report as deducted from		\$0.00
	Your Income (Official Form 106I).	18.	
19. Other payments you make to su Specify:	pport others who do not live with you.	10	
	at included in lines 4 or 5 of this form or on Schodule I: Your Income	19.	\$0.00
20. Other real property expenses not 20a. Mortgages on other property	ot included in lines 4 or 5 of this form or on Schedule I: Your Income.	20a	\$0.00
20b. Real estate taxes.		20b	\$0.00
20c. Property, homeowner's, or re	nter's insurance	20c	\$0.00
20d. Maintenance, repair, and upk		20d	\$0.00
20e. Homeowner's association or			
ZUE. HUITIEUWITER'S ASSOCIATION OF	condominant dues	20e	\$0.00

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Debtor 1 Robin			James	Case number (if known)		
First	Name	Middle Name	Last Name			
21. Other. Spe	ecify:		_		21	\$0.00
	your monthly expense	es.				\$2,261.00
	nes 4 through 21.					\$0.00
22b. Copy	line 22 (monthly expens		\$2,261.00			
22c. Add li	ne 22a and 22b. The res	sult is your monthly exp	enses.		22.	
23. Calculate	your monthly net inco	me.				
23a. Copy	line 12 (your combined	monthly income) from S	Schedule I.		23a	\$2,266.30
23b. Copy	your monthly expenses	from line 22 above.			23b	\$2,261.00
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.						\$5.30
					23c	
For exam	ole, do you expect to fini	ish paying for your car lo	ses within the year after to an within the year or do you no diffication to the terms of	ou expect your		

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Fill in this infor	mation to identify your c	ase:	
Debtor 1	Robin		James
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Northern	District of Illinois
			(State)
Case number (If known)			

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information. $\frac{1}{2} \left(\frac{1}{2} \right) = \frac{1}{2} \left(\frac{1}{2} \right) \left(\frac{1}{2} \right)$

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below	
	Did you pay or agree to pay someone who is NOT an attorney to h	nelp you fill out bankruptcy forms?
	✓ No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	Under penalty of perjury, I declare that I have read the summary a that they are true and correct.	and schedules filed with this declaration and
×	·	×
	Signature of Debtor 1	Signature of Debtor 2
	Date 12/22/2017	Date
	MM/DD/YYYY	MM/DD/YYYY

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Fill in this info	ormation to identify your c	case:					
Debtor 1	Robin		James				
Debtor 2	First Name	Middle Na	me Last Nam	е			
(Spouse, if filing)	First Name	Middle Na	me Last Nam	е			
United States	Bankruptcy Court for the:	Northern	District of Illino				
Case number			(Stat	e)			
(If known)							Check if this is ar
Official	Form 107						amended filing
Stateme	ent of Financia	al Δffairs fo	r Individuals	Filina fo	r Rankru	ntcv	04/1
	ete and accurate as po						
information.	If more space is needenown). Answer every q	ed, attach a separ					
	, ,			- .			
Part 1: Giv	e Details About Your	Marital Status a	nd Where You Lived	Before			
1. What i	s your current marital st	atus?					
✓ M	arried						
☐ No	ot married						
2. During	the last 3 years, have yo	ou lived anywhere	other than where you liv	ve now?			
V No							
ب ا	es. List all of the places yo	ou lived in the last 3	years. Do not include v	vhere you live	now.		
_							
De	ebtor 1:		Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there
			there				tilere
				Same a	s Debtor 1		Same as Debtor 1
N.	umber Street		From	Number Str	n at		From
	Imper Street		То			_	To
Ci	ty State	Zip Code		City	State	Zip Code	
				Same a	s Debtor 1		Same as Debtor 1
Nı	umber Street		From	Number Str	oot		From
	amber Street		То				To
Ci	ty State	Zip Code		City	State	Zip Code	
	ne last 8 years, did you e						
	<i>ories</i> include Arizona, Califo	ornia, Idano, Louisia	na, nevada, New Mexico,	Puerto Rico, I	exas, vvasningto	n, and wisconsin.)
✓ No	Make ours you fill and O	obodulo Ll. Vo O	adabtara (Official Farmer	1064)			
L res	. Make sure you fill out S	CHECULE 17. TOUT C	ouediois (Oniciai Form	100H).			

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Debt	or 1	Robin	James		number (if known)	
		First Name Middle	e Name Last Na	ıme		
Part	2:	Explain the Sources of Your Inc	come			
	Fill i	you have any income from employm n the total amount of income you receiv vities. If you are filing a joint case and you No Yes. Fill in the details.	ved from all jobs and all bus	inesses, including part-time		ars?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		om January 1 of current year until e date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$20298.25	Wages, commissions, bonuses, tips Operating a business	
		or last calendar year: anuary 1 to December 31, 2016) YYYY	Wages, commissions, bonuses, tips Operating a business	\$22640.00	Wages, commissions, bonuses, tips Operating a business	
		or the calendar year before that: anuary 1 to December 31, 2015) YYYY	Wages, commissions, bonuses, tips Operating a business	\$22231.00	Wages, commissions, bonuses, tips Operating a business	
I F	nclu oubl iling	you receive any other income during ide income regardless of whether that in ic benefit payments; pensions; rental inca joint case and you have income that each source and the gross income from No Yes. Fill in the details.	ncome is taxable. Examples come; interest; dividends; m you received together, list it	of other income are alimony; noney collected from lawsuits only once under Debtor 1.	s; royalties; and gambling and lo	
			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
		rom January 1 of current year until ne date you filed for bankruptcy:				
		or last calendar year: lanuary 1 to December 31, 2016) YYYY				
		or the calendar year before that: lanuary 1 to December 31, 2015) YYYY				

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Debtor 1 Robin James __ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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or 1	Robin			Ja	mes	Case number	(if known)
	First Name		Middle Name	La	st Name		
nsi corp age	ders include your porations of which	relatives; an you are a for a busir	any general partner an officer, director, ness you operate a	s; relatives of any person in control	general partners; par , or owner of 20% or	tnerships of which y r more of their voting	who was an insider? you are a general partner; g securities; and any managing r domestic support obligations,
✓	No						
	Yes. List all pay	ments to	an insider.	5	T		D (11)
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	No	_	aranteed or cosigne	·	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
	Insider's Name				<u> </u>		
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City						
		State	Zip Code				

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Debtor 1 Robin James Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Civil Pending Cook County Circuit Court Calvary Court Name On appeal 50 West Washington Street Case number NumberStreet Concluded Illinois 60602 Chicago City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Debt	tor 1 Robin	James	Case number (if known)	
	First Name Middle Name	Last Name		_
11.	Within 90 days before you filed for bankruptcy, did a accounts or refuse to make a payment because you		oank or financial institution, set off any amo	ounts from your
	✓ No Yes. Fill in the details.			
	_	Describe the action th	e creditor took Date action was taken	Amount
	Creditor's Name			
	Number Street			
		Last 4 digits of account	number: XXXX-	
	City State Zip Code			
12.	Within 1 year before you filed for bankruptcy, was ar appointed receiver, a custodian, or another official?		possession of an assignee for the benefit o	creditors, a court-
	✓ No ☐ Yes			
Part	5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankruptcy, did y	ou give any gifts with a t	otal value of more than \$600 per person?	
	✓ No Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift			
	Number Street			
	City State Zip Code			
	Person's relationship to you			
	Person to Whom You Gave the Gift			
	Number Street			
	City State Zip Code			
	Person's relationship to you			

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eptor i	Robin		James	Case number (if know	vn)	
	First Name Mide	dle Name	Last Name	•	·	
. Wit	thin 2 years before you filed for bar	nkruptcy, did y	ou give any gifts or contribut	ions with a total value	of more than \$600	to any charity?
	1 No					
✓	No					
	Yes. Fill in the details for each gift	or contribution	n.			
	Gifts or contributions to charities	c	Describe what you contrib	uitad	Date you	Value
	that total more than \$600	3	Describe what you continu	Juleu	contributed	Value
	that total more than \$600				Contributed	
	Charity's Name					
	Number Street	-				
	Number Street					
	City State 7	7in Codo				
	City State Z	Zip Code				
	1 : 0 : - 1					
τ 6:	List Certain Losses					
	No Yes. Fill in the details. Describe the property you lost ar how the loss occurred	nd	Describe any insurance c Include the amount that ins	urance has paid. List	Date of your loss	Value of property lost
			pending insurance claims o A/B: Property.	n line 33 of <i>Schedule</i>		
			AB. Floperty.			
	•					
rt //:	List Certain Payments or Trar					
abo	thin 1 year before you filed for bank out seeking bankruptcy or preparin	kruptcy, did yo ng a bankrupto	cy petition?			anyone you consulte
abo	thin 1 year before you filed for bank out seeking bankruptcy or preparin lude any attorneys, bankruptcy petitio	kruptcy, did yo ng a bankrupto	cy petition?			anyone you consulte
abo	thin 1 year before you filed for bank out seeking bankruptcy or preparin lude any attorneys, bankruptcy petitio	kruptcy, did yo ng a bankrupto	cy petition?			anyone you consulte
abo	thin 1 year before you filed for bank out seeking bankruptcy or preparin lude any attorneys, bankruptcy petitio	kruptcy, did yo ng a bankrupto	cy petition?	ervices required in your b	ankruptcy. Date payment or transfer	Amount of payment
abo	thin 1 year before you filed for bank out seeking bankruptcy or preparin lude any attorneys, bankruptcy petitio No Yes. Fill in the details.	kruptcy, did yo ng a bankrupto	cy petition? credit counseling agencies for s Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
abo	thin 1 year before you filed for bank out seeking bankruptcy or preparin lude any attorneys, bankruptcy petitio No Yes. Fill in the details.	kruptcy, did yo ng a bankrupto	ey petition? credit counseling agencies for s Description and value of a	ervices required in your b	ankruptcy. Date payment or transfer	Amount of
abo	thin 1 year before you filed for bank out seeking bankruptcy or preparing lude any attorneys, bankruptcy petition. No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid	kruptcy, did yo ng a bankrupto	cy petition? credit counseling agencies for s Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
abo	thin 1 year before you filed for bank out seeking bankruptcy or preparing lude any attorneys, bankruptcy petition. No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue	kruptcy, did yo ng a bankrupto	cy petition? credit counseling agencies for s Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
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Debte		Robin		James	Case n	umber (if known)			
		First Name	Middle Name	Last Name					
	help	hin 1 year before you filed by you deal with your credit not include any payment or t	ors or to make payme		behalf p	ay or transfer a	any property to a	anyone	who promised to
	ightharpoons	No Yes. Fill in the details.							
				Description and value of any partransferred	oroperty		Date payment or transfer was made	Amou	unt of payment
		Person Who Was Paid							
		Number Street							
		City State	Zip Code						
	the Incl	ordinary course of your bu	siness or financial aff nd transfers made as se	ecurity (such as the granting of a sec			•		-
	Ш			Description and value of propertransferred	erty	Describe any payments recin exchange	property or eived or debts រ	oaid	Date transfer was made
		Person Who Received Trans	sfer						
		Number Street							
		City State Person's relationship to you	Zip Code						
		Person Who Received Trans	sfer						
		Number Street							
		City State Person's relationship to you	Zip Code						
	ben	hin 10 years before you file eficiary? ese are often called asset-pro No		you transfer any property to a se	lf-settle	ed trust or simil	ar device of wh	ich you	are a
		Yes. Fill in the details.		Description and value of the	propert	y transferred			Date transfer was made
		Name of trust							

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Debtor 1 Robin James Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code City State Zip Code

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Debtor 1 Robin James Case number (if known) Middle Name First Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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Deb	tor 1				James		Case number (if known)	
		First Name	M	liddle Name	Last Name				
26.	Hav	e you been a party	/ in any judicia	al or administr	ative proceeding ι	under any enviror	nmental law? Ir	nclude settlements and ord	ders.
		No Yes. Fill in the det	ails.						
	_				Court or agency		Nature	of the case	Status of the case
		Case title							Pending
					Court Name				On appeal
		Case number			NumberStreet				Concluded
		_			City Sta	te Zip Code)		_
Par	11:	Give Details Ab	oout Your Bu	siness or Co	nnections to An	y Business			
27.	Witi	A sole propri	etor or self-em a limited liabil a partnership rector, or man at least 5% of bove applies.	aployed in a tra ity company (L aging executiv the voting or e Go to Part 12.	de, profession, or LC) or limited liabile e of a corporation quity securities of a	other activity, eit lity partnership (L a corporation	her full-time or	connections to any busines	ss?
	Ш	Yes. Check all tha	at apply above	e and till in the	details below for e	eacn business. The nature of the bu	usiness	Employer Identification	number Do not
								include Social Security	
		Business Name			_			EIN:	
		Number Street			Name of acc	countant or book	keeper	Dates business existed	
		City	State	Zip Code				From To	
					Describe the	e nature of the bu	usiness	Employer Identification include Social Security	
		Business Name			_			EIN:	
		Number Street			Name of acc	countant or book	keeper	Dates business existed	
		City	State	Zip Code	_			From To	
					Describe the	e nature of the bu	usiness	Employer Identification include Social Security	
		Business Name			_			EIN:	
		Number Street			Name of acc	countant or book	keeper	Dates business existed	
		City	State	Zip Code	_			From To	

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Deb	tor 1	Robin			James	Case number (if known)
		First Name		Middle Name	Last Name	
28.		hin 2 years before ditors, or other pa No Yes. Fill in the de	arties.	bankruptcy, did you	ı give a financial statemer	nt to anyone about your business? Include all financial institutions,
					Date issued	
		Name			MM/DD/YYYY	
		N Observe				
		Number Street				
		City	State	Zip Code		
		• Oity	Otato	Zip Code		
Pari	t 12:	Sign Below				
1	true a	and correct. I und kruptcy case can	lerstand that result in fin	making a false stat es up to \$250,000, o	ement, concealing proper	nts, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		/S/	Robin Jame ture of Debto			Signature of Debtor 2
		Signa	ture or Debto	1		Signature of Debtor 2
		Date ⁻	12/22/2017			Date 12/22/2017
	Did v	ou attach additio	nal nages to	Vour Statement of F	inancial Affairs for Individ	uals Filing for Bankruptcy (Official Form 107)?
			nai pagoo to	Tour Gratomone or I	manolar / mano lor marvia	auto i iling for Bullin aproy (Gillota i Gilli 1017).
	⊻ ^	lo				
	☐ Y	'es				
ı	Did y	ou pay or agree to	o pay someo	ne who is not an atte	orney to help you fill out b	ankruptcy forms?
	V V	lo				
	_	es. Name of perso	n			Attach the Bankruptcy Petition Preparer's Notice,
	Ш '					Declaration, and Signature (Official Form 119).

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Fill in this information to identify your case:				
Debtor 1	Robin		James	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	sankruptcy Court for the:	Northern	District of Illinois (State)	
Case number (If known)			(Grate)	

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral Did you claim the property What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. Creditor's name: Chase Mortgage Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: 4537 S. Leclaire, Chicago, IL 60638 | Value: \$120,666,66 Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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Debto	r Robin		James	Case number (if	
1	First Name	Middle Name	Last Name	known)	
Part 2:	List Your Unexpire	ed Personal Property Leas	es		
inform	ation below. Do not lis		leases are leases that	y Contracts and Unexpired Leases (Official Form 106G), fill in are still in effect; the lease period has not yet ended. You m U.S.C. § 365(p)(2).	
De	escribe your unexpired	personal property leases		Will the lease be assumed?	
Le	essor's name:			□ No □ Yes	
	escription of leased operty:				
Le	essor's name:			□ No □ Yes	
	escription of leased operty:				
Le	essor's name:			□ No □ Yes	
	escription of leased operty:				
Le	essor's name:			No Yes	
	escription of leased operty:			_	
Le	essor's name:			No Yes	
	escription of leased operty:				
Le	essor's name:			No Yes	
	escription of leased operty:			_	
Le	essor's name:			No Yes	
	escription of leased operty:			_	
Part 3:	Sign Below				
	ler penalty of perjury, I perty that is subject to		my intention about any	property of my estate that secures a debt and any personal	
_	/s/ Robin James		x _		
8	Signature of Debtor 1		Sig	gnature of Debtor 2	
[Date 12/22/2017 MM/DD/YYYY		Da	ate 12/22/2017 MM/DD/YYYY	

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

		Northern	District of Illinois		
In re	Robin James		Case No).	
_	Debtor			(If kn	iown)
			Chapter	Chap	oter 7
			ATION OF ATTORNI		
1.	 Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf 	year before the filing	of the petition in bankruptcy, or a	greed to be paid to m	ne, for services
	For legal services, I have agreed to ac	ccept			\$1,765.00
	Prior to the filing of this statement I h	nave received			\$0.00
	Balance Due				\$1,765.00
2	. The source of the compensation paid	to me was:			
	Debtor	Other (s	specify)		
3	. The source of the compensation paid	I to me is:			
	✓ Debtor	Other (s	specify)		
4	I have not agreed to share the abmembers and associates of my la		ensation with any other person un	less they are	
		v firm. A copy of the	ation with a other person or person agreement, together with a list of th		
5	. In return for the above-disclosed fee,	I have agreed to ren	der legal service for all aspects of t	he bankruptcy case, i	ncluding:
	 a. Analysis of the debtor's finan bankruptcy; 	cial situation, and re	ndering advice to the debtor in det	ermining whether to t	file a petition in
	b. Preparation and filing of any	petition, schedules, s	statements of affairs and plan whic	ch may be required;	
	c. Representation of the debtor	at the meeting of cre	ditors and confirmation hearing, a	nd any adjourned hea	arings thereof;
6	. By agreement with the debtor(s), the	above-disclosed fee	does not include the following ser	vices:	
		CE	RTIFICATION		
	certify that the foregoing is a complet tor(s) in this bankruptcy proceedings.	e statement of any a	greement or arrangement for paym	ent to me for represe	ntation of the
	12/22/2017		/s/ Sean McNulty	,	
	Date		Signature of Attorne		
			Semrad Law Firm		
			Name of law firm		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	James, Robin	Case No	
	Debtor(s)		
		Chapter.	Chapter7
	VERIF	ICATION OF CREDITOR MAT	RIX
Ti knowledge		ify that the attached list of creditors is tru	ue and correct to the best of their
Date:	12/22/2017	/s/ James, Robin	
		James, Robin Signature of Debi	tor

USCB CORP 101 HARRISON STREE ARCHBALD, PA, 18403

PORTFOLIO RC 120 Corporate Boulevard Norfolk, VA, 23502

DEVILLE ASSET MANAGEME 1132 Glade Road Colleyville, TX, 76034

CAP ONE 26525 N RIVERWOODS BLVD METTAWA, IL, 60045

MDNGHT VLVT P.O. Box 800849 c/o M.E. Bennett Dallas, TX, 75380

KOHLS/CAPONE PO BOX 3115 MILWAUKEE, WI, 53201

PRFRD CUS AC CSCL DISPUTE TEAM PO BOX 14517 DES MOINES, IA, 50306

SYNCB/QVC PO BOX 965005 ORLANDO, FL, 32896

SYNCB/JCP PO BOX 965007 Orlando, FL, 32896

FST PREMIER 601 S Minneapolis Ave Sioux Falls, SD, 57104

Chase Mortgage P.O. BOX 1093 NORTHRIDGE, CA, 91328

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Calvary SPV I, LLC 500 Summit Lake Drive Suite 400 Valhalla, NY, 10595

HSN Po Box 659707 San Antonio, TX, 78265

Speedy Cash Po Box 101928 Birmingham, AL, 35210

PLS Financial One South Wacker Dr 36th Floor Chicago, IL, 60606

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1,765.00

attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr. Adding additional bills \$31.00 Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments;

or

2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 12/20/2017

Client

Attorney

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Debtor 1 Robin First Name	Middle Name	James Last Name	Case number (ff know	vn)
	estions for Reporting Purpose			
^{16.} What kind of debts do you have?	"incurred by an individua No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primaril	al primarily for a p y business debts' investment or thr	ersonal, family, or house ? <i>Business debts</i> are deb ough the operation of th	ots that you incurred to obtain be business or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that No.	er 7. Do you estimat		operty is excluded and administrative ed creditors?
18. How many creditors do you estimate that you owe?	✓ 1-49✓ 50-99✓ 100-199✓ 200-999		5,000 10,000 -25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?		\$10,00 \$50,00	,001-\$10 million 10,001-\$50 million 10,001-\$100 million 100,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,00 \$50,00	,001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below				
Tol you	correct. If I have chosen to file under C of title 11, United States Code under Chapter 7. If no attorney represents me ar out this document, I have obta I request relief in accordance w I understand making a false sta	hapter 7, I am awa I understand the ad I did not pay or ined and read the with the chapter of atement, concealir case can result in 1519, and 3571.	re that I may proceed, if relief available under ear agree to pay someone wonotice required by 11 U. title 11, United States Cg property, or obtaining	Code, specified in this petition. I money or property by fraud in I imprisonment for up to 20 years, or Debtor 2

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i Agranayan (1) yi yoto ga		제 시급하실하는 하는 이 기계			
Fill in this info	rmation to identify your	case:			
Debtor 1	Robin First Name	Middle Name	James Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States I Case number (If known)	Bankruptcy Court for the	Northern	District of Illinois (State)		
Official	Form 106D	⊖C			Check if this is a amended filing
Declarat	ion About an	Individual Debt	or's Schedule	S	12/1
If two married	people are filing toget	her, both are equally respon	sible for supplying corre	ect information.	
money or prop U.S.C. §§ 152,	erty by fraud in connec 1341, 1519, and 3571.	file bankruptcy schedules o tion with a bankruptcy case	or amended schedules. Ne can result in fines up to	Making a false statement, conc o \$250,000, or imprisonment fo	ealing property, or obtaining or up to 20 years, or both. 18
Part 1: Sign	Below				
Did you p	ay or agree to pay som	eone who is NOT an attorne	y to help you fill out bar	nkruptcy forms?	
✓ No					
Yes.	Name of person		Attach Bankruptcy Signature (Official I	Petition Preparer's Notice, Declara Form 119).	ntion, and
	nalty of perjury, I decla are true and correct.	re that I have read the sumr	mary and schedules filed	I with this declaration and	
/s/ Robin		fom so	Signatur	re of Debtor 2	en e
Date 12/2			Date	C Of Bobiof E	

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Debte	or 1 Robin		James	Case number (if known)
~~~~	First Name	Middle Name	Last Name	
	Within 2 years be creditors, or othe		f you give a financial stater	nent to anyone about your business? Include all financial institutions,
	☑ No ☑ Yes. Fill in the	e details below.		
4	L		Date issued	
			Buto toducu	
	Name		MM/DD/YYYY	_
	Number St	reet	<del></del>	
	City	State Zip Code		
Part 1	2: Sign Below	1		
tr	ue and correct. I	understand that making a false :	statement, concealing prop	ments, and I declare under penalty of perjury that the answers are erty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Si	gnature of Debtor 1		Signature of Debtor 2
	Da	ate 12/20/2017	1	Date 12/20/2017
Di	d you attach add	itional pages to Your Statement	of Financial Affairs for Indiv	riduals Filing for Bankruptcy (Official Form 107)?
<u> </u>	No Yes			
Di	d you pay or agre	e to pay someone who is not an	attorney to help you fill out	bankruptcy forms?
V	No			
È	Yes. Name of po	erson		Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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otor Robin		James	Case number (if
First Name	Middle Name	Last Name	known)
2: List Your Unexpired	Personal Property Leas	ses	
mation below. Do not list re	perty lease that you listed i eal estate leases. Unexpire property lease if the trustee	d leases are leases that	Contracts and Unexpired Leases (Official Form 106G), fill in th are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).
Describe your unexpired pe	rsonal property leases		Will the lease be assumed?
Lessor's name:			☐ No ☐ Yes
Description of leased property:	Millian Millian (1994) and American (1994) and the second construction of t	an ann an an tao mara na mana an mara na an	
essor's name:			□ No
Description of leased property:			Yes
essor's name:	an and a second control of the second contro	and the same of the same of the same of the same	□ No □ Yes
Description of leased property:			
essor's name:			□ No □ Yes
Description of leased roperty:			
essor's name:			☐ No ☐ Yes
escription of leased roperty:			
essor's name:			☐ No ☐ Yes
escription of leased roperty:			
essor's name:			☐ No ☐ Yes
escription of leased roperty:			<b>_</b>
Sign Below			
der penalty of perjury, I deoperty that is subject to an		my intention about any p	property of my estate that secures a debt and any personal
/s/ Robin James Signature of Debtor 1	- form	Sigr	nature of Debtor 2
Date 12/20/2017 MM/DD/YYYY	I	Date	2 12/20/2017 MM/DD/YYYY

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### UNITED STATES BANKRUPTCY COURT

**Northern District of Illinois** 

In re:	James, Robin  Debtor(s)	Case No	Case No			
	200.01(0)	Chapter.	Chapter7			
	VERIF	FICATION OF CREDITOR MAT	RIX			
T knowledg		erify that the attached list of creditors is tr	ue and correct to the best of their			
Date:	12/20/2017	/s/ James, Robin James, Robin Signature of Deb				

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Debtor 1	Robin First Name	Middle Name	James	Case number (if know	n)	
	Filst (vaite	Middle Name	Last Name	Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
8.Unemployment compensation  Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:				\$0.00	\$0.00	
For y	ou	·	\$0.00			
For y	our spouse		\$450.00			
9.Pens bene	ion or retirement in fit under the Social Se	come. Do not include any amou	nt received that was a	\$0.00	\$ <u>0.00</u>	,
amou paym intem	unt. Do not include ar rents received as a vic	ources not listed above. Specify benefits received under the So tim of a war crime, a crime again errorism. If necessary, list other so ow.	cial Security Act or st humanity, or			
Other	r Government Assista	nce		\$178.00	\$0.00	
	amounts from separa			+\$0.00	+\$0.00	
1016	amounts nom separa	ace pages, it any.				=
11. Cal each	culate your total cu	irrent monthly income. Add line	es 2 through 10 for	\$2,125.88 <b>+</b>	\$0.00	\$2,125.88
	umn. Then add the to	otal for Column A to the total for	Column B.			
						Total current
Dowl Or	Datarmina What	her the Means Test Applie	a ta Vau			monthly income
		monthly income for the year. For the monthly income from line 11.	ollow these steps:	Copy lin	ie 11 here →	\$0.40E.00
		umber of months in a year).		оору ш	L	\$2,125.88
		ual income for this part of the fo	rm		12b. [	X 12
	, , , , , , , , , , , , , , , , , , ,				125.	\$25,510.56
13 Calcu	ılate the median far	mily income that applies to you	J. Follow these steps:			
Eill in	the state is which we		Illinois			
LIU IG	the state in which yo	u iive.				
Fill in	the number of people	e in your household.				
Fill in house		come for your state and size of			13.	\$94,472.00
instru		nedian income amounts, go onli This list may also be available at thre?			٠	THE PROPERTY OF THE PARTY OF TH
14a.	Line 12b is less to	han or equal to line 13. On the to	p of page 1, check box 1	, There is no presumption of ab	ouse.	
14b.	Line 12b is more Go to Part 3 and	than line 13. On the top of page fill out Form 122A-2.	1, check box 2, The pres	sumption of abuse is determined	d by Form 122A-2.	
Part 3:	Sign Below					
By si	gning here, I declare	under penalty of perjury that the	information on this statem	nent and in any attachments is t	rue and correct.	
×	/s/ Robin James	1 iten	×			
_	ignature of Debtor 1			ignature of Debtor 2	······································	
_		1				
D	ate 12/20/2017 MM/DD/YYYY		D	ate 12/20/2017 MM/DD/YYYY		
				WIW// DD/ 1   1		

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.